

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY			
Full Name (Last, First, Middle Initial) of Payee Master Print, Inc.		Date MM / DD / YYYYYY 04 / 21 / 2012	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">959.70</div>	
City Newington	State VA	Zip Code 22122	Transaction ID : 45134142
Purpose of Expenditure Print 4 Color Flyers	Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	Office Sought: <input type="checkbox"/> House State: <u>UT</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Orrin Grant Hatch		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>			
Full Name (Last, First, Middle Initial) of Payee Federal Capitol Communications Corporation		Date MM / DD / YYYYYY 04 / 21 / 2012	
Mailing Address 950 F Street, NW, #525		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1250.00</div>	
City Washington	State DC	Zip Code 20004	Transaction ID : 45135178
Purpose of Expenditure Print 4 Color Flyers Production Cost	Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	Office Sought: <input type="checkbox"/> House State: <u>UT</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Orrin Grant Hatch		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>			
(a) SUBTOTAL of Itemized Independent Expenditures.....		<div style="border: 1px solid black; padding: 2px;">2209.70</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures.....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>Mary Rose Adkins</u> <div style="text-align: center;">[Electronically Filed]</div>		Date MM / DD / YYYYYY 04 / 23 / 2012	